Application No. Filing Date Examiner Art Ut 10/734,305-Conf. #3862 December 15, 2003 S. Termanini 2177. Applicant(s): Jiang WANG Invention: MULTI-MODAL HANDWRITING RECOGNITON CORRECTION FIELD OF THE INVENT INVENTION OF THE IN	AMEN	Docket No. 5486-0184PUS1				
policant(s): Jiang WANG Invention: MULTI-MODAL HANDWRITING RECOGNITON CORRECTION FIELD OF THE INVENTION IS Amendment commissioner for Patents O. Box 1450 Iransmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED	• •					Art Unit
S Amendment ommissioner for Patents O. Dex 1450 exandria, VA 22313-1450 Fransmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. CLAIMS AS AMENDED			December	10, 2000	O. Terriariii	2170
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CLAIMS AS AMENDED CLAIMS AS AMENDED Remaining After Number Paid Previously Present Rate Total Claims 48 - 48 = 0 x 50.00 0.00 Independent 4 - 4 = 0 x 210.00 0.00 Multiple Dependent Claims (check if applicable) Other fee (please specify): Extension for response within second month 460.00 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 460.00 X Large Entity Small Entity No additional fee is required for this amendment. X Please charge Deposit Account No. 02-2448 in the amount of \$ 460.00 Account No. 160.00 A check in the amount of \$ 160.00 Account No. 160.	ommissioner for l O. Box 1450 lexandria, VA 223	313-1450	ndment in the	shove identif	ied application	
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Independent Claims 4 - 4 = 0 x 210.00 0.00 Multiple Dependent Claims (check if applicable) Other fee (please specify): Extension for response within second month 460.00 TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 460.00 X Large Entity Small Entity No additional fee is required for this amendment. X Please charge Deposit Account No. 02-2448 in the amount of \$ 460.00 . A duplicate copy of this sheet is enclosed. A check in the amount of \$ is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed. X Credit any overpayment. X Charge any additional filling or application processing fees required under 37 CFR 1.16 and 1.11 Michael K. Mutter Mutter March 17 TONAL Dated: March 18, 2008 BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747		Remaining After	Number Previously	Extra Claims	Rate	
Claims		48	- 48 =	0	x 50.00	0.00
Other fee (please specify): Extension for response within second month TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: Small Entity		4	- 4 =	0	x 210.00	0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: Large Entity	Multiple Depend	lent Claims (ch	eck if applicabl	e)		
X Large Entity	Other fee (pleas	e specify): E	extension for res	ponse within s	econd month	460.00
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